

11-16-00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	94.		10/13/00
O.I.P.E. CLASSIFIER		59	10/19
FORMALITY REVIEW	WTT	571	11/13/00
RESPONSE FORMALITY REVIEW	PS		1/1/01

## INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
—	(Through numeral).... Canceled	A	..... Appeal
⊥	..... Restricted	O	..... Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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47	✓	✓	
48	✓	✓	
49	✓	✓	
50	✓	✓	

Claim	Date
Final Original	
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Claim		Date
Final	Original	
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If more than 150 claims or 10 actions  
stamp additional sheet here

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